



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8232

|  |   |                               |   |   |                                |
|--|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/916,715   | <b>FILING DATE</b><br>07/27/2001<br><b>RULE</b>   | <b>CLASS</b><br>370           | <b>GROUP ART UNIT</b><br>2661   | <b>ATTORNEY DOCKET NO.</b><br>3COM 3715-1 |                                |
| <b>APPLICANTS</b><br>Chi-Lie Wang, Sunnyvale, CA;<br>Li-Jau Yang, San Jose, CA;<br>Kap Soh, Fremont, CA;<br>Chin-Li Mou, San Jose, CA;   |   |                               |   |   |                                |
| <b>** CONTINUING DATA *****</b>  |   |                               |   |   |                                |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/19/2001</b>   |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>13   | <b>TOTAL CLAIMS</b><br>48                 | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>22470  |   |                               |   |   |                                |
| <b>TITLE</b><br>Network interface supporting of virtual paths for quality of service with dynamic buffer allocation  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>1214   | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |